U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Nulliber 0 - Constant	2. Fiscal Year Covered From:
/	01/04/04 Through: [] / 31/09
3. Name and address of person filing.	Name, file number, and address of labor organization.
Name BERVARD L RAVASIO	Name WITED STEELWORKERS LICHE 1190
Company and the state of the st	Labor Organization File Number 1960 1969 2018
gette gester.	The state of the s
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 127 SO THIRD ST.	Street 227 GITHED ST.
City STEVBENVILLE	City STEVBENVICLE
State 0410 ZIP Code + 4 439534	State OFUD ZIP Code + 4 43959
5. Position in labor organization.	
PRESIDENT	
Enter appropriate data below If, during the past fiscal year, you or your spot	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	sions set forth in the instructions):
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu A. Held an interest in, engaged in transactions (including loans) with, or o monetary value from an employer whose employees your organization	sions set forth in the instructions):
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  B. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  B. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the exclu  A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.  6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	derived income or other economic benefit of on represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

Date

Telephone Number

Name of Person Filing	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
City State ZIP Code + 4	11.a. Nature of such dealing.	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	Tr.a. Nature of Such Dealing.	
Street  City  State  ZIP Code + 4	11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.	
	12.b. Amount.	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name RERUBRO RAVASIO  Trade Name, if any: UNITED STEELWORKERS	14.a. Nature of payment.  SPIRTS TICKETS 9/5000 4/74/04	
P.O. Box, Bldg., Room No., if any  Street 217 So. TH/RD ST.  City STEUBENWLLE  State OHIO ZIP Code + 4 43951 9		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	